**Guidelines for Adhering to
the Swedish Policy on HIPAA Privacy and Epic Access**

All Epic users know that Swedish policy permits the use of Epic for business purposes only.
The following guidelines are intended to clearly explain what this means on a practical level.

If you have specific situations or questions that are not covered in this document, ask your supervisor or call the Privacy Officer at 206-215-2605.

What is Appropriate Access?

Ask yourself the following questions:

1. **Am I using the patient data or information to provide or support patient care because it is my job?**
   If the answer is yes, you are likely accessing Epic appropriately.

2. **Am I accessing the patient data or information to answer a specific clinical question for a patient I am caring for?**
   If the answer is yes, you are likely accessing Epic appropriately.

3. **Am I accessing the patient data or information because I am concerned or curious about how the patient is doing?**
   If the answer is yes, think about this some more. Do you currently need this information to do your job, or care for the patient, or are you just curious or concerned for some other reason? If you are not in active treatment of the patient, this may be inappropriate access.

   Examples of Appropriate Access:
   - To relay lab results to the attending physician (at the physician's request), a nurse accesses the patient's record for the results.
   - To determine whether a specific social worker should be called to assist the patient at discharge, a nurse looks for documentation of a social work visit.
   - To resolve an insurance company denial, a patient financial services staff person looks at a patient's medication administration record to locate the amount of a particular medication given.
   - To provide information for a flower delivery, a volunteer accesses the location of a patient.
   - To transfer a caller to a patient room, a call center employee looks up the location of the patient.
   - To assume responsibility for a colleague's patient (at the colleague's request), a physician reviews the recent progress notes for that patient.
   - To answer a question from another Swedish department, a nurse accesses the patient record to verify the order(s) performed.

   Examples of Inappropriate Access:
   - A user looks at her own record to see when she was last in for a mammogram.
     - Violation of Swedish policy: *Patient Health Information: Employee Access to Personal and Family Medical Records*
       - **Recommend - contact the clinic directly for visit history**
   - A user looks at his 3-year-old son's record to see if he is up-to-date with immunizations.
     - Violation of Swedish policy: *Patient Health Information: Employee Access to Personal and Family Medical Records*
       - **Recommend - contact the clinic directly for immunization history**
   - A user looks at her husband's operative report from last year with his verbal permission.
     - Violation of Swedish policy: *Patient Health Information: Employee Access to Personal and Family Medical Records, Authorization for Disclosure of Health Information*

- **Recommend – contact Health Information Management for a copy of the operative report**
- A user looks at her mother's lab results at the direction of the mother's physician with mother's verbal permission.
    - o Violation of Swedish policy: *Patient Health Information: Employee Access to Personal and Family Medical Records, Authorization for Disclosure of Health Information*
        - **Recommend – call the physician's office for the results or contact Health Information Management for a copy of the results**
- A user looks up her co-worker's hospital room number so she can visit during lunch.
    - o Violation of *Information Confidentiality Agreement*
        - **Recommend – call information desk for patient location**
- A physician is starting a clinical trial and is looking for study subjects with CHF so she goes to the telemetry unit and looks through the floor's patient list scrolling to each patient with CHF
    - o Violation of Swedish policy: *Patient Health Information: Use for Research Purposes*
        - **Recommend – contact Research coordinator or Research Compliance Officer for information on how to identify potential subjects appropriately**

About Accessing Your Own Personal Records

Swedish policy prohibits an employee from viewing his/her own record or a family member's record in Epic as this is considered personal use, unrelated to the job. However, any patient – including employees and family members – can gain access to their records by contacting Health Information Management.

Why Can't Staff Look Up Their Own Records?
- To protect the integrity of the patient medical record. Just as employees have never had unrestricted access to Health Information Management, Swedish needs to control access to assure that people are not in a position to make unauthorized or inappropriate changes to records, particularly in Epic where records can be more easily altered.
- To comply with federal HIPAA requirements for accounting of releases of records. Swedish has the responsibility to account for disclosures of medical record information.
- To assure our patients that we protect the confidentiality of their information. For example, consider the privacy concerns of a 16-year-old seeking contraception, whose parent just happens to be an Epic user.

Again, patient records are available – by request – through the proper channels. Swedish is also preparing to offer a new module of Epic called My Chart. This feature will give patients ready access to their records and allows them to grant access to others in a controlled and compliant manner. Until then, we need to continue adhering to our current policies and procedures.

Answering Patient Questions about Records in Epic
- Patients have a right to see all the information in their chart.
- Patients may look over your shoulder as you enter data into the chart. If you are comfortable, this is allowable.
- For a more detailed review of the patient's Epic data, it is important to remember that patients might not understand the data in their chart without appropriate explanation and context. This may require having a nurse, or the physician who entered the data, explain its meaning as the patient is viewing the data.
- If a patient wants a printed record from the hospital chart, the patient should request this information using a "Release of Information" form through Health Information Management.

Examples of Patient Questions and Answers
- Patient asks: "*What are you doing with that computer?*"
    - o Answer: *"I am entering your vital signs and my assessment. Would you like to see?"*
- Patient asks *"What did the doctor say about me yesterday? Will you read it to me?"*

- o Answer: *"I think that is an important question to ask your doctor. Would you like me to ask him to share it with you? Or would you like to ask him? I think it is important that he explains his note rather than me so he can answer your questions directly."*
- Patient asks: "*I want to see everything in my record. Will you show it to me?*"
  - o Answer: *"I will ask my manager to arrange for a nurse or your physician to review your chart with you. We want to make sure that all your questions are answered appropriately."*
- Patient asks: "*I want a copy of my records. Will you print it out for me?*"
  - o Answer: *"I can't do that here, but I am happy to help you make the request. Let me get the form for you."*
- Patient asks: "Can my family watch you put my information into the system?"
  - o Answer: *"The information belongs to you, so we cannot share it with anyone without your permission."*
- Patient asks: *"I am worried anyone walking down the hall will be able to read my record on the computer."*
  - o Answer: *"We are very careful to protect the viewing of the computers in the hallway by closing the chart when we are done and by signing out when we are finished."*
- Patient asks: "*How can I know who has been looking at my chart?*"
  - o Answer: *"Are you worried about a particular person seeing your chart? We can ask the Privacy Officer to run a report to see if that person has looked at it."*

Health Information Management can be reached at 206-386-2181.
Carolyn Barton, Privacy Officer, can be reached at 206-215-2605.